

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

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(FOR USE WITH FORM PTO-875)

10/765209

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	OEP.	IND.	OEP.	IND.	OEP.	IND.	OEP.	IND.	OEP.	IND.	OEP.
1	/	F		/		51					/
2	/		/	/	/	52					/
3	2	*	/	/	/	53					/
4	/		/	/	/	54					/
5	/		/	/	/	55					/
6	/		/	/	/	56					/
7	/		/	/	/	57					/
8	/		/	/	/	58					/
9	/		/	/	/	59					/
10	/		/	/	/	60					/
11	/		/	/	/	61					/
12	/		/	/	/	62					/
13	/		/	/	/	63					/
14	/		/	/	/	64					/
15	/		/	/	/	65					/
16	/		/	/	/	66					/
17	/		/	/	/	17					
18	/		/	/	/	18					
19	/		/	/	/	19					
20	/		/	/	/	20					
21	/		/	/	/	21					
22	/		/	/	/	22					
23	/		/	/	/	23					
24	/		/	/	/	24					
25	/		/	/	/	25					
26	/		/	/	/	26					
27	/		/	/	/	27					
28	/		/	/	/	28					
29	/	/	/	/	/	29					
30	/	/	/	/	/	30					
31	/	/	/	/	/	31					
32	/	/	/	/	/	32					
33	/	/	/	/	/	33					
34	/	/	/	/	/	34					
35	/	/	/	/	/	35					
36	/	/	/	/	/	36					
37	/	/	/	/	/	37					
38	/	/	/	/	/	38					
39	/	/	/	/	/	39					
40	/	/	/	/	/	40					
41	/	/	/	/	/	41					
42	/	/	/	/	/	42					
43	/	/	/	/	/	43					
44	/	/	/	/	/	44					
45	/	/	/	/	/	45					
46	/	/	/	/	/	46					
47	/	/	/	/	/	47					
48	/	/	/	/	/	48					
49	/	/	/	/	/	49					
50	/	/	/	/	/	50					
TOTAL IND.	2	2				TOTAL IND.				1	
TOTAL OEP.	45	46				TOTAL OEP.				43	
TOTAL CLAIMS	47	48				TOTAL CLAIMS				44	